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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10756368
	Filing Date	01/14/2004
	First Named Inventor	Secondo Dottari
	Art Unit	1651
	Examiner Name	SAUCIER, Sandra E.
	Attorney Docket Number	1108.1039

I hereby revoke all previous powers of attorney given in the above-identified application:

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☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Giulia Tagliafico</i>		
Name	Giulia TAGLIAFICO		
Date	02/03/04	Telephone	0039-06-91 39 37 45

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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